



SAN DIEGO COUNTY INDIAN GAMING LOCAL COMMUNITY BENEFIT COMMITTEE

Application Form For FY 2013-2014 Grants

- A. Name of Jurisdiction: Grossmont Healthcare District
- B. Mailing Address of Jurisdiction: 9001 Wakarusa St. La Mesa, CA 91942
- C. Name of Project: Grossmont Hospital Heart and Vascular Center
- D. Impacts are associated with which casino(s)? Barona, Sycuan, Viejas
- E. The following uses are the priorities for receipt of grant money.
Please check all the priorities the project satisfies:

| | | |
|-----------------------|-------------------------------|---------------------------------|
| Law Enforcement | Fire Services | Emergency Medical Services X |
| Environmental Impacts | Water Supplies | Waste Disposal |
| Behavioral Health | Public Health X | Planning and Adjacent Land Uses |
| Roads | Recreation and Youth Programs | Child Care Programs |

- F. On a separate sheet, please provide the following:
- 1) A complete description of the project;

- 2) Evidence showing the relationship between the project and impacts on your jurisdiction associated with the particular casino(s) listed under "D" above, and data linking the percentage of the requested funding to the percentage of impacts associated with particular casinos (include the data source); and
- 3) An explanation of how the proposed project will mitigate impacts of casino(s).

AB 2515 (2012) amended Government Code Section 12715(b)(1)(A) establishing all application policies and procedures for grants from the Individual Tribal Casino Account or County Tribal Casino Account. *Each grant application shall clearly show how the grant will mitigate the impact of the casino on the grant applicant.* Maps, tables, data and/or descriptions should be attached to this application to provide an explanation and documentation for the Indian Gaming Local Community Benefit Committee. This information is necessary for the IGLCBC to review and to make a determination of how the grant mitigates proportional share and compliance with all requirements established in Government Code Section 12715(b)(1)(A).

G. Type of grant for which you are applying: (Check each that applies)

1. **60% Nexus Grant (note that only County of San Diego Offices and Departments are eligible for this type of grant)¹ _____**

2. **20% Non-Nexus Grant x _____**

These "20% Non-Nexus Grants" are intended only for local jurisdictions (County, cities and special districts) impacted by Barona and/or Sycuan Casinos.

3. **20% Non-Nexus Grant x _____**

These "20% Non-Nexus Grants" are intended for local jurisdictions (County, cities and special districts) impacted by casinos of Tribes NOT paying into the Special Distribution Fund² and for assistance to local jurisdictions for one-time large capital projects.

H. What is the project's estimated time frame?

Construction of the Heart and Vascular Center's lower level (including material handling and loading dock) has begun, to be followed by work on the middle level (including clinical lab and pharmacy). The completion date for these levels is estimated to be 2015. The rest of the project (building out the top of the building including cath labs and operating rooms) and other renovations will be done by 2017.

- I. Proportionate share of the project expenditure that mitigates the impact from the casino(s): 2.5%

J. Amount of funding requested through this application: \$250,000

¹ County of San Diego is the only "local government jurisdiction" that meets two or more nexus criteria.

² Campo, La Jolla (proposed), La Posta, Pala, Pauma, Rincón, San Pasqual, Santa Ysabel and Viejas Bands.

- K. What will be the total cost of the project? \$92,469,000
- L. If total cost of the project exceeds amount of funding requested, please name other sources of funding that will be contributed to the project and the amount provided by each source:

\$88,414,000 of the total project cost will be funded by Proposition G (Grossmont Healthcare District, 2006) property taxes. \$4,055,150 of the cost will be a combination of funds raised in the community through grants/private donations and hospital operating revenue.

Dollars raised through contributions and grants will benefit the overall Prop G program by maximizing available funding and assist in meeting patient care needs at Grossmont Hospital. The overall available Prop G funding, all projects, is \$247 million not counting needed non-capital equipment, which cannot be funded with Prop G monies. This compares to current estimated needed funds for all the Prop G projects in excess of \$270 million plus needed non-capital equipment.

- M. On a separate sheet, please describe how you intend to meet the requirement that grant recipients must provide notice to the public, either through a slogan, signage or other mechanism, which states that the project has received funding from the Indian Gaming Special Distribution Fund and further identifies the particular Individual Tribal Casino Account from which the grant derives.

Please e-mail the complete Application to Eric.Lardy@sdcountry.ca.gov **AND** hand-deliver or mail a copy with the page containing the original Authorized Signature to the following address **by March 26, 2014**.

County of San Diego

Attn. Mr. Eric Lardy
1600 Pacific Highway
Room 212, MS A6
San Diego, CA 92101

I, Barry Jantz, hereby acknowledge that the grant funds requested herein shall be used solely for the purpose that to the best of my knowledge mitigates impacts from casino projects. In compliance with AB 158, I agree to ensure that all grant funds received shall be deposited in a separate interest-bearing account; and at the completion of the project, I agree to return any earned interest or cost savings from the project to the County for reallocation by the Indian Gaming Local Community Benefit Committee.

Submitted by: Barry Jantz



(Authorized Signature)

Title: Chief Executive Officer
Grossmont Healthcare District

Date: 3/26/14

CONTACT PERSON: Name: Barry Jantz, CEO, Grossmont Healthcare District

Phone: (619) 825-5050

Fax: (619) 825-5051

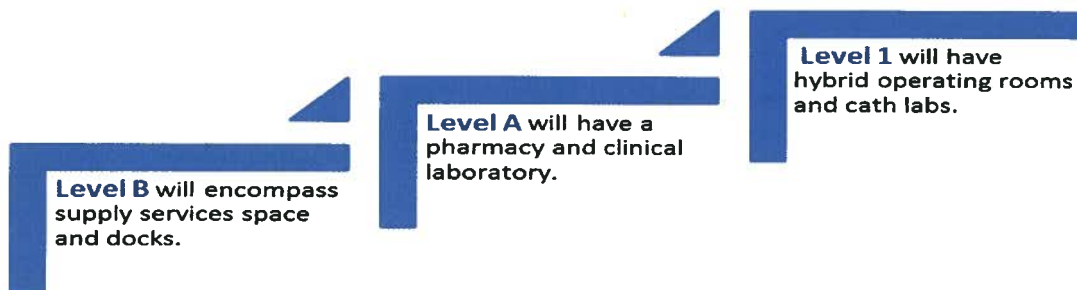
E-mail Address: bjantz@grossmonthealthcare.org

F.

1) A complete description of the project:

A grant award to Grossmont Healthcare District from the IGLCBC will continue to help fund the construction of a new Heart and Vascular Center at Grossmont Hospital and support superior cardiovascular treatment in East County. Grossmont Healthcare District currently manages Proposition G improvement projects at the hospital. The grant will be a District managed project.

High-tech, high quality and innovation sums up the care to be provided at the Heart and Vascular Center. It will be dedicated solely to meeting and treating the challenges of heart and vascular diseases and defects. Everything about the center is designed to make an inherently stressful time more caring and supportive for patients and their families. The three level facility located on the south side of the hospital campus will be equipped with the newest diagnostic, monitoring and treatment equipment to assess the individual character of each cardiovascular case and tailor the most appropriate solution.



2) Evidence showing the relationship between the project and impacts on your jurisdiction associated with the particular casino(s) listed under "D" above, and data linking the percentage of the requested funding to the percentage of impacts associated with particular casinos (include the data source):

Despite common misconceptions about non-smoking sections and expensive ventilation systems, 100 percent smoke-free environments remain the only proven protection from the dangers of secondhand smoke which contains over 250 toxins and 69 carcinogens. Brief exposure to secondhand smoke can cause sudden dangerous respiratory and cardiac events, especially for people with preexisting conditions and seniors. Inhaling secondhand smoke increases the chances of blood clots, can block arteries, and make it more difficult for arteries to expand properly all of which are physical changes that can trigger heart attacks. Five minutes in a room with smoke stiffens the aorta making it difficult to pump blood. Twenty minutes causes blood platelets to become stickier increasing the risk of heart attack and stroke. After two hours heart rhythms, even in the healthiest person, are affected and unhealthy individuals can experience fibrillations.

A National Cancer Institute and University of California, San Francisco's Center for Tobacco Control Research and Education study (published in the American Heart Association Journal, *Circulation*: August 7, 2013) is one of the first to focus on the number of ambulance calls (in Gilpin County, Colorado, a tourist destination with 26 casinos) and the health impact of smoking bans in those casinos. The study tracked more than 16,600 ambulance calls from January 2000 through December 2012. Its findings revealed that when smoking was banned from casinos, ambulance calls to casinos dropped. This mimicked the decrease in ambulance calls from workplaces, restaurants and bars when two years earlier Colorado banned smoking from such public locations. Ambulance calls to those locations went down 22.8 percent. Casinos, however, were exempt from the ban and their ambulance calls remained about the same. Later, in 2008 when smoking was also banned at casinos ambulance calls to casinos dropped by 19.1 percent.

Although tribal casinos in San Diego County do offer ventilation systems and separate areas for non-smoking gaming, no tribal casino in the county is 100 percent smoke-free. Ambulance runs in 2013 from local casinos to Sharp Grossmont Hospital were as follows:

| 2013 Grossmont Base Station ambulance runs | Calls from casinos | Arrivals at Grossmont Hospital Emergency Department from casinos | Increase from 2012 casino ambulance runs to Grossmont Hospital ED |
|--|--------------------|--|---|
| Barona FD | 457 | 197 | 13% |
| Sycuan FD | 458 | 244 | 11% |
| Viejas | 632 | 388 | 49% |
| Total | 1,547 | 829 | 29% |

Data from casino ambulance runs in 2013 listed arrivals in three categories: inpatient; outpatient; and outpatient observation. Data also listed diagnosis. Approximately 21 percent of the total casino ambulance run patients presented at the ED with a confirmed cardiac-related diagnosis. For example, chest pain, heart attack (including fatal), stroke, heart palpitations, cardiopulmonary, and elevated cardiac caused by hypertension.

The proportional benefit calculation is based on:

- the number of casino ambulance runs arriving at Grossmont Hospital ED in 2013 who had cardiac-related diagnosis and were admitted as inpatients (69); and
- the number of all inpatient discharges at Grossmont Hospital in 2013 with a Cardiology DRG that came through the Emergency Room (2,733)

| 2013 Grossmont Base Station ambulance runs | Number of casino ambulance run patients who were Cardiology Diagnostic Related Group (DRG) | Number of the Cardiology DRG who were admitted as inpatients |
|--|--|--|
| Barona FD | 41 | 15 |
| Sycuan FD | 59 | 26 |
| Viejas | 76 | 28 |
| Total | 176 | 69 |

This data demonstrates a proportional benefit of 2.5% to the casinos, and 97.5% to the jurisdiction. Construction costs total \$92,469,000. The IGLCBC grant request of \$250,000 reflects well below 2.5% of this amount.

There are indications of numerous other diagnoses that ED patients arrived with (e.g., shortness of breath, loss of consciousness) that may likely have been related to cardiac issues, but these were not included due to the length of time needed for compilation of complex data pulls for verification.

Notably, 543 outpatients and inpatients that came through the ED via their own transportation or ambulance (but not necessarily directly from casinos) were identified as casino employees. Due to time constraints and the complexity of the task, obtaining the number of how many were Cardiology DRG could not be extracted from data.

3) An explanation of how the proposed project will mitigate impacts of casino(s):

With one of the busiest emergency departments in the county, many people who present at the Grossmont Hospital emergency department are cardiac patients, or high-risk patient populations requiring rapid cardiovascular interventions. The hospital's new Heart and Vascular Center will offer an integrated approach to diagnosis, treatment and rehabilitation of heart conditions. A patient entering the new Heart and Vascular Center will be evaluated more efficiently and thoroughly in one location by a team of medical professionals. This streamlined approach will make it quicker and easier for patients to get the comprehensive assessment and treatment they need.

With a new Heart and Vascular Center, interventional cardiologists at the hospital will be able to expand their use of the latest technologies and equipment for the treatment of coronary artery disease including balloon angioplasty and drug-eluting stents. These procedures are also used very effectively in emergency situations. Severe heart attacks are known as STEMI (ST segment elevation myocardial infarctions), and Sharp Grossmont provides optimal care for STEMI patients by providing treatment within its cath lab in 90 minutes or less, as required by county guidelines. STEMI patients treated within the hospital's cath lab undergo treatments that quickly unblock clogged arteries and restore blood flow to the damaged portion of the heart. The hospital meets the required guideline with 100 percent of its STEMI patients, maintaining an average treatment, or "door to balloon" time, of 50 minutes; far less than the county average of 60 minutes. This has resulted in the hospital being a designated STEMI Center and a Joint Commission Stroke Center of Excellence. Door-to-balloon times can be reduced when chest pain patients are transported to the emergency department by ambulance. The paramedics are equipped to perform an ECG, thereby making a preliminary diagnosis of STEMI. The emergency department can then prepare for potential angioplasty or percutaneous coronary intervention. This treatment of STEMI patients helps timely restoration of blood flow through the blocked coronary artery and myocardial reperfusion. Shortened reperfusion times lead to improved patient outcomes.

The cardiovascular surgeon of today must be able to adapt to new minimally invasive procedures and hybrid procedures which have resulted in the decreased morbidity of elderly patients and high risk patients who often have poor surgical outcomes. Traditional cardiac surgery is rapidly

disappearing and has been substituted with less invasive percutaneous techniques. The ability to provide such cutting edge technology borders on the availability of new procedural environments such as hybrid operating rooms/cath labs planned for the new Heart and Vascular Center. Grant funding from the IGLCBC will support the availability of the most advanced cardiovascular care to East San Diego County.

- M. Describe how you intend to meet the requirement that grant recipients must provide notice to the public, either through a slogan, signage or other mechanism, which states that the project has received funding from the Indian Gaming Special Distribution Fund and further identifies the particular Individual Tribal Casino Account from which the grant derives:

A plaque will be displayed at the Heart and Vascular Center.